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	RULE			

APPLICANTS

Harold O. Levitt, Pittsburgh, PA;

** CONTINUING DATA ***** **N O N E**
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** FOREIGN APPLICATIONS ***** **N O N E**
 FHD

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 3	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged FHD Examiner's Signature	Initials				

ADDRESS

Mr. Harold O. Levitt
 128 N. Craig St. Apt. 710
 Pittsburgh , PA
 15213

TITLE

Snore relief belt

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